

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JEB 2016, INC.

A. Full Name (Last, First, Middle Initial)

MR. MARIO A. FERNANDEZ

Mailing Address 6915 TULIPAN CT

City	State	Zip Code
CORAL GABLES	FL	33143-6518

FEC ID number of contributing
federal political committee.

C

Name of Employer
VISULATE

Occupation
PA

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Transaction ID : SA17.153992

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

CONTRIBUTION

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)

DR. MAXIMO FERNANDEZ

Mailing Address 979 CAPTIVA DR

City	State	Zip Code
HOLLYWOOD	FL	33019-5046

FEC ID number of contributing
federal political committee.

C

Name of Employer
VANGUARD MEDICAL GROUP

Occupation
MEDICAL DOCTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17.123647

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

CONTRIBUTION

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

MR. MICHAEL FERNANDEZ JR.

Mailing Address 121 ALHAMBRA PLZ
STE 1100

City	State	Zip Code
CORAL GABLES	FL	33134-4522

FEC ID number of contributing
federal political committee.

C

Name of Employer
STUDENT

Occupation
STUDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17.148360

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....

4950.00

Total This Period (last page this line number only).....